

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

ALAMEDA COUNTY TREASURER

1221 OAK ST

OAKLAND CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,291,069.00

Gross Claim **\$2,291,069.09**

Net Claim / Payment Amount **\$2,291,069.09**

YTD Amount: **\$23,207,966.00**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 58,408.00

Gross Claim **\$58,407.77**

Net Claim / Payment Amount **\$58,407.77**

YTD Amount: **\$591,656.32**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 105,137.00

Gross Claim **\$105,137.06**

Net Claim / Payment Amount **\$105,137.06**

YTD Amount: **\$1,065,012.54**

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 194,122.00

Gross Claim **\$194,121.99**

Net Claim / Payment Amount **\$194,121.99**

YTD Amount: **\$1,966,408.01**

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 374,726.00

Gross Claim **\$374,725.72**

Net Claim / Payment Amount **\$374,725.72**

YTD Amount: **\$3,795,879.28**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 113,683.00

Gross Claim **\$113,682.84**

Net Claim / Payment Amount **\$113,682.84**

YTD Amount: **\$1,151,579.15**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 94,667.00

Gross Claim \$94,666.96

Net Claim / Payment Amount \$94,666.96

YTD Amount: \$958,953.03

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,455,359.00

Gross Claim \$1,455,358.79

Net Claim / Payment Amount \$1,455,358.79

YTD Amount: \$14,742,426.35

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REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 99,646.00

Gross Claim **\$99,645.86**

Net Claim / Payment Amount **\$99,645.86**

YTD Amount: **\$1,009,388.06**

For assistance, please call: John Bodolay at (916) 323-2154

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REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

EL DORADO COUNTY TREASURER

360 FAIR LN

PLACERVILLE CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 260,438.00

Gross Claim **\$260,438.37**

Net Claim / Payment Amount **\$260,438.37**

YTD Amount: **\$2,638,176.57**

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,575,847.00

Gross Claim **\$1,575,846.87**

Net Claim / Payment Amount **\$1,575,846.87**

YTD Amount: **\$15,962,940.92**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 100,184.00

Gross Claim **\$100,184.42**

Net Claim / Payment Amount **\$100,184.42**

YTD Amount: **\$1,014,843.48**

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

HUMBOLDT COUNTY TREASURER

825 FIFTH ST RM 125

EUREKA CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 231,116.00

Gross Claim **\$231,116.34**

Net Claim / Payment Amount **\$231,116.34**

YTD Amount: **\$2,341,151.60**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

IMPERIAL COUNTY TREASURER
940 WEST MAIN ST

EL CENTRO CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 318,400.00

Gross Claim \$318,399.80

Net Claim / Payment Amount \$318,399.80

YTD Amount: \$3,225,311.60

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 67,572.00

Gross Claim \$67,571.51

Net Claim / Payment Amount \$67,571.51

YTD Amount: \$684,482.72

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

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REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,360,022.00

Gross Claim **\$1,360,022.00**

Net Claim / Payment Amount **\$1,360,022.00**

YTD Amount: **\$13,776,688.10**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A

PAYMENT ISSUE DATE: 11/15/2012

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 267,552.00

Gross Claim **\$267,552.27**

Net Claim / Payment Amount **\$267,552.27**

YTD Amount: **\$2,710,238.65**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 132,555.00

Gross Claim **\$132,554.62**

Net Claim / Payment Amount **\$132,554.62**

YTD Amount: **\$1,342,745.72**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 99,803.00

Gross Claim \$99,803.39

Net Claim / Payment Amount \$99,803.39

YTD Amount: \$1,010,983.81

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

LOS ANGELES COUNTY TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 18,293,498.00

Gross Claim **\$18,293,498.07**

Net Claim / Payment Amount **\$18,293,498.07**

YTD Amount: **\$185,308,633.03**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MADERA COUNTY TREASURER
C/O BANK OF AMERICA
PO BOX 1859
SACRAMENTO CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 280,223.00

Gross Claim **\$280,223.33**

Net Claim / Payment Amount **\$280,223.33**

YTD Amount: **\$2,838,593.36**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MARIN COUNTY TREASURER
PO BOX 4220
CIVIC CENTER
SAN RAFAEL CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 363,033.00

Gross Claim **\$363,033.15**

Net Claim / Payment Amount **\$363,033.15**

YTD Amount: **\$3,677,436.44**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MARIPOSA COUNTY TREASURER
PO BOX 36

MARIPOSA CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 68,090.00

Gross Claim **\$68,090.21**

Net Claim / Payment Amount **\$68,090.21**

YTD Amount: **\$689,737.05**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 161,266.00

Gross Claim **\$161,265.74**

Net Claim / Payment Amount **\$161,265.74**

YTD Amount: **\$1,633,582.27**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MERCED COUNTY TREASURER
PO BOX 981311

WEST CA 95798 1311
SACRAMENTO

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 471,501.00

Gross Claim **\$471,500.79**

Net Claim / Payment Amount **\$471,500.79**

YTD Amount: **\$4,776,186.93**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 63,499.00

Gross Claim **\$63,498.73**

Net Claim / Payment Amount **\$63,498.73**

YTD Amount: **\$643,226.54**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MONO COUNTY TREASURER

PO BOX 495

BRIDGEPORT CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 66,225.00

Gross Claim **\$66,224.80**

Net Claim / Payment Amount **\$66,224.80**

YTD Amount: **\$670,840.94**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 750,988.00

Gross Claim **\$750,988.33**

Net Claim / Payment Amount **\$750,988.33**

YTD Amount: **\$7,607,326.93**

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

NAPA COUNTY TREASURER

1195 THIRD ST RM 108

NAPA CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 215,745.00

Gross Claim **\$215,745.47**

Net Claim / Payment Amount **\$215,745.47**

YTD Amount: **\$2,185,448.46**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

NEVADA COUNTY TREASURER
PO BOX 128

NEVADA CITY CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 176,583.00

Gross Claim **\$176,583.46**

Net Claim / Payment Amount **\$176,583.46**

YTD Amount: **\$1,788,747.00**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

ORANGE COUNTY TREASURER
PO BOX 981024

WEST CA 95798 1024
SACRAMENTO

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 5,205,675.00

Gross Claim **\$5,205,675.02**

Net Claim / Payment Amount **\$5,205,675.02**

YTD Amount: **\$52,732,206.67**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 437,252.00

Gross Claim **\$437,251.72**

Net Claim / Payment Amount **\$437,251.72**

YTD Amount: **\$4,429,252.34**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 91,730.00

Gross Claim \$91,730.21

Net Claim / Payment Amount \$91,730.21

YTD Amount: \$929,204.48

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

RIVERSIDE COUNTY TREASURER
C/O UNION BANK OF CA ST GOV
PO BOX 4035
SACRAMENTO CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 3,338,964.00

Gross Claim \$3,338,964.38

Net Claim / Payment Amount \$3,338,964.38

YTD Amount: \$33,822,887.39

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SACRAMENTO COUNTY TREASURER
PO BOX 980264

WEST CA 95798 0264
SACRAMENTO

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,058,015.00

Gross Claim \$2,058,014.99

Net Claim / Payment Amount \$2,058,014.99

YTD Amount: \$20,847,185.30

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SAN BENITO COUNTY TREASURER
COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER CA 95023

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 128,016.00

Gross Claim **\$128,015.66**

Net Claim / Payment Amount **\$128,015.66**

YTD Amount: **\$1,296,767.13**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SAN BERNARDINO CO TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 3,379,526.00

Gross Claim \$3,379,525.60

Net Claim / Payment Amount \$3,379,525.60

YTD Amount: \$34,233,762.55

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST CA 95798 0304
SACRAMENTO

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 5,248,371.00

Gross Claim **\$5,248,371.24**

Net Claim / Payment Amount **\$5,248,371.24**

YTD Amount: **\$53,164,708.89**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,188,982.00

Gross Claim **\$1,188,982.24**

Net Claim / Payment Amount **\$1,188,982.24**

YTD Amount: **\$12,044,097.49**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SAN JOAQUIN COUNTY TREASURER
PO BOX 981355

WEST CA 95798 1355
SACRAMENTO

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,081,776.00

Gross Claim **\$1,081,776.14**

Net Claim / Payment Amount **\$1,081,776.14**

YTD Amount: **\$10,958,126.05**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 436,346.00

Gross Claim **\$436,345.60**

Net Claim / Payment Amount **\$436,345.60**

YTD Amount: **\$4,420,073.50**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SAN MATEO COUNTY TREASURER
C/O UNION BANK ST GOVT DEPT
PO BOX 4035
Sacramento CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,044,920.00

Gross Claim **\$1,044,920.12**

Net Claim / Payment Amount **\$1,044,920.12**

YTD Amount: **\$10,584,783.63**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 743,789.00

Gross Claim **\$743,788.62**

Net Claim / Payment Amount **\$743,788.62**

YTD Amount: **\$7,534,395.61**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SANTA CLARA CO TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,943,561.00

Gross Claim **\$2,943,561.03**

Net Claim / Payment Amount **\$2,943,561.03**

YTD Amount: **\$29,817,548.71**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 472,703.00

Gross Claim **\$472,702.77**

Net Claim / Payment Amount **\$472,702.77**

YTD Amount: **\$4,788,362.69**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 310,879.00

Gross Claim **\$310,878.62**

Net Claim / Payment Amount **\$310,878.62**

YTD Amount: **\$3,149,123.90**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 59,669.00

Gross Claim \$59,669.30

Net Claim / Payment Amount \$59,669.30

YTD Amount: \$604,435.37

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 110,911.00

Gross Claim **\$110,910.66**

Net Claim / Payment Amount **\$110,910.66**

YTD Amount: **\$1,123,497.70**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SOLANO COUNTY T TC
675 TEXAS ST STE 1900

FAIRFIELD CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 648,189.00

Gross Claim **\$648,189.27**

Net Claim / Payment Amount **\$648,189.27**

YTD Amount: **\$6,565,997.77**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 728,307.00

Gross Claim **\$728,306.96**

Net Claim / Payment Amount **\$728,306.96**

YTD Amount: **\$7,377,570.26**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 825,489.00

Gross Claim **\$825,489.31**

Net Claim / Payment Amount **\$825,489.31**

YTD Amount: **\$8,362,003.53**

For assistance, please call: John Bodolay at (916) 323-2154

11/9/2012

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 306,136.00

Gross Claim **\$306,136.02**

Net Claim / Payment Amount **\$306,136.02**

YTD Amount: **\$2,096,954.83**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

TEHAMA COUNTY TREASURER
PO BOX 1150

RED BLUFF CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 128,488.00

Gross Claim **\$128,488.26**

Net Claim / Payment Amount **\$128,488.26**

YTD Amount: **\$1,301,554.42**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 357,003.00

Gross Claim \$357,003.40

Net Claim / Payment Amount \$357,003.40

YTD Amount: \$3,616,356.54

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 65,975.00

Gross Claim \$65,975.06

Net Claim / Payment Amount \$65,975.06

YTD Amount: \$668,311.09

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 781,591.00

Gross Claim **\$781,591.11**

Net Claim / Payment Amount **\$781,591.11**

YTD Amount: **\$7,917,325.55**

For assistance, please call: John Bodolay at (916) 323-2154

11/9/2012

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 122,787.00

Gross Claim **\$122,787.02**

Net Claim / Payment Amount **\$122,787.02**

YTD Amount: **\$1,243,802.26**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK
PO BOX 980307
WEST CA 95798 0307
SACRAMENTO

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 **To** 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,333,321.00

Gross Claim **\$1,333,321.01**

Net Claim / Payment Amount **\$1,333,321.01**

YTD Amount: **\$13,506,213.67**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200089A
PAYMENT ISSUE DATE: 11/15/2012

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 10/01/2012 To 10/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 347,959.00

Gross Claim **\$347,958.77**

Net Claim / Payment Amount **\$347,958.77**

YTD Amount: **\$3,524,736.71**

For assistance, please call: John Bodolay at (916) 323-2154

11/9/2012

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